

**City of Salem
Water & Sewer Department**

**Application For Nonresidential Establishments
Discharge Permit**

General Instructions:

For your best interests, if there is any part of this form that may be deemed proprietary information, please stamp as such so that proper steps will be taken to keep such information proprietary.

Please complete the attached form and return it to the following address:

City of Salem Water Department
Attn: Frank C. Young III
P.O. Box 869
Salem, VA 24153

If you should have any questions, please contact the following person(s):

Frank C. Young III- Chief WTP Operator- City of Salem
Ian A. Smith, P.E.- Environmental Programs Engineer- WVWA

Signatory Requirement

I certify under penalty of law that I have personally examined and am familiar with the information in this application and all attachments and that, based on my inquiry of those persons in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name- Authorized Representative

Official Title

Signature

Date

Water & Sewer Department

I. General Information:

A. Establishment Name _____
Physical Address _____
Mailing Address _____
City _____ State _____ Zip Code _____
Telephone Number(s) _____

B. Authorized person to represent this establishment in official dealings with the Western Virginia Water Authority Water Pollution Control Plant:

Name _____
Title _____
Telephone Number(s) _____
Email address _____

C. Alternate person to contact concerning information herein:

Name _____
Title _____
Telephone Number(s) _____
Email address _____

D. Identify the type of business activity conducted (e.g.: auto repair, machine shop, warehousing, electroplating, painting, food processing/packaging, restaurant, etc.):

E. Provide a brief narrative description of the manufacturing, production or service activities provided/conducted by your business establishment:

F. Proper Federal Standard Industrial Classification (SIC) Code(s) and North American Industry Classification System (NAICS) Code(s):

G. This Business Establishment generates the following types of wastes (check all that apply):

	<i>Avg. Gallons per day</i>	Estimated/Measured	
1. Domestic wastes (restrooms, showers, etc.) _____		[]	[]
2. Cooling water, non-contact.)..... _____		[]	[]
3. Boiler/Tower blow down..... _____		[]	[]
4. Cooling water, contact..... _____		[]	[]
5. Process water..... _____		[]	[]
6. Equipment/Facility wash down..... _____		[]	[]
7. Air Pollution Control Unit..... _____		[]	[]
8. Storm water runoff to sewer..... _____		[]	[]
9. Other: _____		[]	[]
Total Gallons: _____			

H. This Business Establishment discharges wastes to (check all that apply):

	<i>Avg. Gallons per day</i>	Estimated/Measured	
1. Sanitary sewer..... _____		[]	[]
2. Storm sewer..... _____		[]	[]
3. Surface water..... _____		[]	[]
4. Ground water..... _____		[]	[]
5. Waste haulers..... _____		[]	[]
6. Evaporation..... _____		[]	[]
7. Other: _____		[]	[]
Total Gallons: _____			

I. Is a Spill Prevention Control Countermeasure Plan prepared for this Business Establishment? [] yes [] no

If yes, then please enclose a copy of your Spill Prevention Control Countermeasure Plan when returning this form.

II. Facility Operation Characteristics:

A. Total number of employees..... _____

B. Total number of shifts..... _____

C. Starting times of each shift:
1st _____; 2nd _____; 3rd _____; 4th _____; 5th _____

Note: The following information must be completed for each product line.

D. Principal product(s) produced: _____

E. Raw materials and process additives used: _____

F. This Production process is:

☐ Batch ☐ Continuous ☐ Both

If Both, then: _____ % Batch and _____ % Continuous.

G. Hours of Operation: _____ to _____ ☐ continuous

H. Is the production of this product line subject to seasonal variation?

☐ yes ☐ no

If yes, then briefly describe the seasonal production cycle: _____

I. Are any process changes or expansions planned during the next three years?

☐ yes ☐ no

If yes, then attach a separate sheet to this form describing the nature of planned changes or expansions (**Note: You may want to stamp this CONFIDENTIAL**).

III. Wastewater Information:

A. Does your Business Establishment employ processes in any of the industrial categories or business activities listed below? (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Electroplating | <input type="checkbox"/> Dairy Products Processing |
| <input type="checkbox"/> Organic Chemicals, Plastics & Synthetic Fibers | <input type="checkbox"/> Canned & Preserved Fruits & Vegetables Processing |
| <input type="checkbox"/> Inorganic Chemicals | <input type="checkbox"/> Grain Mills |
| <input type="checkbox"/> Soap & Detergent Manufacturing | <input type="checkbox"/> Canned & Preserved Seafood Processing |
| <input type="checkbox"/> Fertilizer Manufacturing | <input type="checkbox"/> Sugar Processing |
| <input type="checkbox"/> Petroleum Refining | <input type="checkbox"/> Textile Mills |
| <input type="checkbox"/> Iron & Steel Manufacturing | <input type="checkbox"/> Cement Manufacturing |
| <input type="checkbox"/> Nonferrous Metals Manufacturing | <input type="checkbox"/> Feedlots |
| <input type="checkbox"/> Steam Electric Power Generation | <input type="checkbox"/> Phosphate Manufacturing |
| <input type="checkbox"/> Ferro-alloy Manufacturing | <input type="checkbox"/> Meat Products Processing |
| <input type="checkbox"/> Leather Tanning & Finishing | <input type="checkbox"/> Coal Mining |
| <input type="checkbox"/> Glass Manufacturing | <input type="checkbox"/> Oil & Gas Extraction |
| <input type="checkbox"/> Asbestos Manufacturing | <input type="checkbox"/> Mineral Mining & Dressing |
| <input type="checkbox"/> Rubber Manufacturing | <input type="checkbox"/> Ore Mining & Dressing |
| <input type="checkbox"/> Timber Products Processing | <input type="checkbox"/> Copper Forming |
| <input type="checkbox"/> Nonferrous Metals Forming | <input type="checkbox"/> Aluminum Forming |
| <input type="checkbox"/> Pulp, Paper & Paperboard Processing | <input type="checkbox"/> Gum & Wood Chemicals Manufacturing |
| <input type="checkbox"/> Builder's Paper & Board Mills | <input type="checkbox"/> Pesticide Chemicals |
| <input type="checkbox"/> Metal Finishing | <input type="checkbox"/> Explosives Manufacturing |
| <input type="checkbox"/> Pharmaceutical Manufacturing | <input type="checkbox"/> Carbon Black Manufacturing |
| <input type="checkbox"/> Paint Formulating | <input type="checkbox"/> Photographic |
| <input type="checkbox"/> Ink Formulating | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Battery Manufacturing | <input type="checkbox"/> Plastics Molding & Forming |
| <input type="checkbox"/> Metal Molding & Casting | <input type="checkbox"/> Paving & Roofing Materials (tars and asphalt) |
| <input type="checkbox"/> Coil Coating | <input type="checkbox"/> Porcelain Enameling |
| <input type="checkbox"/> Electrical & Electronic Components | |

B. If there have been analyses performed on the wastewater discharge(s) from your Business Establishment, then attach a copy of the most recent data/results to this questionnaire. Be sure to include the dates of sampling and analysis, along with descriptive explanation(s) of sampling location(s). (Sketches or marked plans will suffice)

IV. Wastewater Quality Characterization:

Indicate by placing an "X" in the appropriate box by each listed parameter whether it is "Suspected to be Absent", "Known to be Absent", "Suspected to be Present" or "Known to be Present" in the waste stream(s). Provide chemical analyses if available (specify units). Attach additional sheets if necessary (one set for each waste stream).

A. General Pollutant Information:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Bromide	[]	[]	[]	[]	_____
2. Chlorine, Total Residual	[]	[]	[]	[]	_____
3. Color	[]	[]	[]	[]	_____
4. Fecal Coliform	[]	[]	[]	[]	_____
5. Fluoride	[]	[]	[]	[]	_____
6. Nitrate-Nitrite (as N)	[]	[]	[]	[]	_____
7. Nitrogen, Total Organic (as N)	[]	[]	[]	[]	_____
8. Oil and Grease	[]	[]	[]	[]	_____
9. Phosphorus, Total (as P)	[]	[]	[]	[]	_____
10. Radioactivity					
a. Alpha, Total	[]	[]	[]	[]	_____
b. Beta, Total	[]	[]	[]	[]	_____
c. Radium, Total	[]	[]	[]	[]	_____
d. Radium 226, Total	[]	[]	[]	[]	_____
11. Sulfate (as SO ₄)	[]	[]	[]	[]	_____
12. Sulfate (as SO ₃)	[]	[]	[]	[]	_____
13. Surfactants	[]	[]	[]	[]	_____
14. Aluminum, Total	[]	[]	[]	[]	_____
15. Barium, Total	[]	[]	[]	[]	_____
16. Boron, Total	[]	[]	[]	[]	_____
17. Cobalt, Total	[]	[]	[]	[]	_____
18. Iron, Total	[]	[]	[]	[]	_____
19. Magnesium, Total	[]	[]	[]	[]	_____
20. Molybdenum, Total	[]	[]	[]	[]	_____
21. Manganese, Total	[]	[]	[]	[]	_____
22. Tin, Total	[]	[]	[]	[]	_____
23. Titanium, Total	[]	[]	[]	[]	_____
24. Algaecides	[]	[]	[]	[]	_____
25. Ammonia	[]	[]	[]	[]	_____
26. Biochemical Oxygen Demand (BOD ₅)	[]	[]	[]	[]	_____
27. Calcium	[]	[]	[]	[]	_____
28. Chemical Oxygen Demand (COD ₅)	[]	[]	[]	[]	_____

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<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
29. Chloride	[]	[]	[]	[]	_____
30. Dyes (organic)*	[]	[]	[]	[]	_____
31. Dyes (inorganic)*	[]	[]	[]	[]	_____
32. Flammable Liquids*	[]	[]	[]	[]	_____

33. High Temperature (>40°C)	[]	[]	[]	[]	_____
34. Organic Nitrogen	[]	[]	[]	[]	_____
35. pH (standard units)	[]	[]	[]	[]	_____
36. Potassium	[]	[]	[]	[]	_____
37. Sodium	[]	[]	[]	[]	_____
38. Total Suspended Solids	[]	[]	[]	[]	_____
39. Turbidity (NTU)	[]	[]	[]	[]	_____
40. Others**	[]	[]	[]	[]	_____

*Specify substance or compound, in space provided below. Where possible, trade names should be accompanied by a listing of chemical constituents and a Material Safety Data Sheet. _____

**Other waste substances _____

B. Priority Pollutant Information:

a. Metals and Inorganics (Total):

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Antimony	[]	[]	[]	[]	_____
2. Arsenic	[]	[]	[]	[]	_____
3. Asbestos	[]	[]	[]	[]	_____
4. Beryllium	[]	[]	[]	[]	_____
5. Cadmium	[]	[]	[]	[]	_____
6. Chromium	[]	[]	[]	[]	_____
7. Copper	[]	[]	[]	[]	_____
8. Cyanide	[]	[]	[]	[]	_____
9. Lead	[]	[]	[]	[]	_____
10. Mercury	[]	[]	[]	[]	_____
11. Nickel	[]	[]	[]	[]	_____
12. Selenium	[]	[]	[]	[]	_____
13. Silver	[]	[]	[]	[]	_____
14. Thallium	[]	[]	[]	[]	_____
15. Zinc	[]	[]	[]	[]	_____

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b. Phenols and Cresols:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Phenol(s)	[]	[]	[]	[]	_____
2. Phenol, 2-chloro	[]	[]	[]	[]	_____
3. Phenol, 2,4-dichloro	[]	[]	[]	[]	_____

4. Phenol, 2,4,6-trichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Phenol, pentachloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Phenol, 2-nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Phenol, 4-nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Phenol, 2,4-dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
9. Phenol, 2,4-dimethyl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
10. m-Cresol, p-chloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
11. o-cresol, 4,6-dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

c. Monocyclic Aromatics (Excluding Phenols, Cresols and Phthalates):

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Benzene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Benzene, chloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Benzene, 1,2-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Benzene, 1,3-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Benzene, 1,4-dichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Benzene, 1,2,4-trichloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Benzene, hexachloro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Benzene, ethyl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
9. Benzene, nitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
10. Toluene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
11. Toluene, 2,4-dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
12. Toluene, 2,6-dinitro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

d. PCB's and Related Compounds:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. PCB-1016	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. PCB-1221	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. PCB-1232	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. PCB-1242	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. PCB-1248	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. PCB-1254	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. PCB-1260	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. 2-Chloronaphthalene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

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e. Ethers:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Ether, bis-(chloromethyl)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Ether, bis-(2-chloroethyl)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Ether, bis-(2-chlorosopropyl)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Ether, bis-(2-chloroethyl vinyl)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

5. Ether, 4-bromophenyl phenyl	[]	[]	[]	[]	_____
6. Ether, 4-chlorophenyl phenyl	[]	[]	[]	[]	_____
7. Bis (2-chloroethoxy) methane	[]	[]	[]	[]	_____

f. Nitrosamines and Other Nitrogen-Containing Compounds:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Nitrosamine, dimethyl	[]	[]	[]	[]	_____
2. Nitrosamine, diphenyl	[]	[]	[]	[]	_____
3. Nitrosamine, di-n-propyl	[]	[]	[]	[]	_____
4. Benzidine	[]	[]	[]	[]	_____
5. Benzidine, 3,3-dichloro	[]	[]	[]	[]	_____
6. Hydrazine, 1,2-diphenyl	[]	[]	[]	[]	_____
7. Acrylonitrile	[]	[]	[]	[]	_____

g. Halogenated Aliphatics:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Methane, bromo-	[]	[]	[]	[]	_____
2. Methane, chloro	[]	[]	[]	[]	_____
3. Methane, dichloro	[]	[]	[]	[]	_____
4. Methane, chlorodibromo	[]	[]	[]	[]	_____
5. Methane, dichlorobromo	[]	[]	[]	[]	_____
6. Methane, tribromo	[]	[]	[]	[]	_____
7. Methane, trichloro	[]	[]	[]	[]	_____
8. Methane, tetrachloro	[]	[]	[]	[]	_____
9. Methane, trichlorofluoro	[]	[]	[]	[]	_____
10. Methane, dichlorofluoro	[]	[]	[]	[]	_____
11. Ethane, 1,1-dichloro	[]	[]	[]	[]	_____
12. Ethane, 1,2-dichloro	[]	[]	[]	[]	_____
13. Ethane, 1,1,1-trichloro	[]	[]	[]	[]	_____
14. Ethane, 1,1,2,1-tetrachloro	[]	[]	[]	[]	_____
15. Ethane, hexachloro	[]	[]	[]	[]	_____
16. Ethene, chloro	[]	[]	[]	[]	_____
17. Ethene, 1-1 dichloro	[]	[]	[]	[]	_____

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<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
18. Ethene, trans-dichloro	[]	[]	[]	[]	_____
19. Ethene, trichloro	[]	[]	[]	[]	_____
20. Ethene, tetrachloro	[]	[]	[]	[]	_____
21. Propane, 1,2-dichloro	[]	[]	[]	[]	_____
22. Propene, 2,4-dichloro	[]	[]	[]	[]	_____
23. Butadiene, hexachloro	[]	[]	[]	[]	_____
24. Cyclopentadiene, hexachloro	[]	[]	[]	[]	_____

h. Phthalate Ester:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Phthalate, di-c-methyl	[]	[]	[]	[]	_____
2. Phthalate, di-n-ethyl	[]	[]	[]	[]	_____
3. Phthalate, di-n-butyl	[]	[]	[]	[]	_____
4. Phthalate, di-n-octyl	[]	[]	[]	[]	_____
5. Phthalate, bis (2-ethylhexyl)	[]	[]	[]	[]	_____
6. Phthalate, butyl benzyl	[]	[]	[]	[]	_____

i. Polycyclic Aromatic Hydrocarbons:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Acenaphthene	[]	[]	[]	[]	_____
2. Acenaphthylene	[]	[]	[]	[]	_____
3. Anthracene	[]	[]	[]	[]	_____
4. Benzo(a) anthracene	[]	[]	[]	[]	_____
5. Benzo (b) fluoranthene	[]	[]	[]	[]	_____
6. Benzo (k) fluoranthene	[]	[]	[]	[]	_____
7. Benzo (ghi) perylene	[]	[]	[]	[]	_____
8. Benzo (a) pyrene	[]	[]	[]	[]	_____
9. Chrysene	[]	[]	[]	[]	_____
10. Dibenzo (a,n) anthracene	[]	[]	[]	[]	_____
11. Fluoranthene	[]	[]	[]	[]	_____
12. Indeno (1,2,3-cd) pyrene	[]	[]	[]	[]	_____
13. Naphthalene	[]	[]	[]	[]	_____
14. Phenanthrene	[]	[]	[]	[]	_____
15. Pyrene	[]	[]	[]	[]	_____

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j. Pesticides:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Acrolein	[]	[]	[]	[]	_____
2. Aldrin	[]	[]	[]	[]	_____
3. BHC (Alpha)	[]	[]	[]	[]	_____
4. BHC (Beta)	[]	[]	[]	[]	_____
5. BHC (Gamma) or Lindane	[]	[]	[]	[]	_____

6. BHC (Delta)	[]	[]	[]	[]	_____
7. Chlordane	[]	[]	[]	[]	_____
8. DDD	[]	[]	[]	[]	_____
9. DDE	[]	[]	[]	[]	_____
10. DDT	[]	[]	[]	[]	_____
11. Dieldrin	[]	[]	[]	[]	_____
12. Endosulfan (Alpha)	[]	[]	[]	[]	_____
13. Endosulfan (Beta)	[]	[]	[]	[]	_____
14. Endosulfan Sulfate	[]	[]	[]	[]	_____
15. Endrin	[]	[]	[]	[]	_____
16. Endrin aldehyde	[]	[]	[]	[]	_____
17. Heptachlor	[]	[]	[]	[]	_____
18. Heptachlor eposide	[]	[]	[]	[]	_____
19. Isopharone	[]	[]	[]	[]	_____
20. TCDD (or Dioxin)	[]	[]	[]	[]	_____
21. Toxaphene	[]	[]	[]	[]	_____

C. Hazardous Substances Information:

<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
1. Acetaldehyde	[]	[]	[]	[]	_____
2. Allyl alcohol	[]	[]	[]	[]	_____
3. Allyl chloride	[]	[]	[]	[]	_____
4. Amyl acetate	[]	[]	[]	[]	_____
5. Aniline	[]	[]	[]	[]	_____
6. Benzonitrile	[]	[]	[]	[]	_____
7. Benzyl chloride	[]	[]	[]	[]	_____
8. Butyl acetate	[]	[]	[]	[]	_____
9. Butylamine	[]	[]	[]	[]	_____
10. Captan	[]	[]	[]	[]	_____
11. Carbaryl	[]	[]	[]	[]	_____
12. Carbofuran	[]	[]	[]	[]	_____
13. Carbon disulfide	[]	[]	[]	[]	_____
14. Chlorpyrifos	[]	[]	[]	[]	_____
15. Coumaphos	[]	[]	[]	[]	_____

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<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
16. Cresol	[]	[]	[]	[]	_____
17. Crotonaldehyde	[]	[]	[]	[]	_____
18. Cyclohexane	[]	[]	[]	[]	_____
19. 2,4-Dichlorophenoxy acetic acid	[]	[]	[]	[]	_____
20. Diazinon	[]	[]	[]	[]	_____
21. Dicamba	[]	[]	[]	[]	_____
22. Dichlobenil	[]	[]	[]	[]	_____

23. Dichlone	[]	[]	[]	[]	_____
24. 2,2-Dichloropropionic Acid	[]	[]	[]	[]	_____
25. Dichlorvos	[]	[]	[]	[]	_____
26. Diethylamine	[]	[]	[]	[]	_____
27. Dimethylamine	[]	[]	[]	[]	_____
28. Dinitrobenzene	[]	[]	[]	[]	_____
29. Diquat	[]	[]	[]	[]	_____
30. Disulfoton	[]	[]	[]	[]	_____
31. Diuron	[]	[]	[]	[]	_____
32. Epichlorohydrin	[]	[]	[]	[]	_____
33. Ethanolamine	[]	[]	[]	[]	_____
34. Ethion	[]	[]	[]	[]	_____
35. Ethylenediamine	[]	[]	[]	[]	_____
36. Ethlyenedibromide	[]	[]	[]	[]	_____
37. Formaldehyde	[]	[]	[]	[]	_____
38. Furfural	[]	[]	[]	[]	_____
39. Guthion	[]	[]	[]	[]	_____
40. Isoprene	[]	[]	[]	[]	_____
41. Isopropanolamine dodecylbenzene-sulfanate	[]	[]	[]	[]	_____
42. Kelthane	[]	[]	[]	[]	_____
43. Kepone	[]	[]	[]	[]	_____
44. Malathion	[]	[]	[]	[]	_____
45. Mercaptodimethur	[]	[]	[]	[]	_____
46. Methoxychlor	[]	[]	[]	[]	_____
47. Methylmercaptan	[]	[]	[]	[]	_____
48. Methylmethacrylate	[]	[]	[]	[]	_____
49. Methylparathion	[]	[]	[]	[]	_____
50. Mevinphos	[]	[]	[]	[]	_____
51. Mexacarbate	[]	[]	[]	[]	_____
52. Monoethylamine	[]	[]	[]	[]	_____
53. Monomethylamine	[]	[]	[]	[]	_____
54. Naled	[]	[]	[]	[]	_____
55. Napthenic acid	[]	[]	[]	[]	_____
56. Nitrotoluene	[]	[]	[]	[]	_____

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<u>Parameters</u>	<u>Known Present</u>	<u>Suspected Present</u>	<u>Known Absent</u>	<u>Suspected Absent</u>	<u>Concentration</u>
57. Parathion	[]	[]	[]	[]	_____
58. Phenolsulfanate	[]	[]	[]	[]	_____
59. Phosgene	[]	[]	[]	[]	_____
60. Propargite	[]	[]	[]	[]	_____
61. Propylene oxide	[]	[]	[]	[]	_____
62. Pyrethrins	[]	[]	[]	[]	_____
63. Quinoline	[]	[]	[]	[]	_____
64. Resorcinol	[]	[]	[]	[]	_____
65. Strontium	[]	[]	[]	[]	_____

66. Strychnine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
67. Styrene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
68. 2,4,5-Trichlorophenoxy acetic acid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
69. TDE (Tetrachlorodiphenylethane)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
70. 2,4,5-Trichlorophenoxy) (propanoic acid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
71. Trichlorofan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
72. Triethylamine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
73. Trimethylamine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
74. Uranium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
75. Vanadium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
76. Xylene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
77. Xylenol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
78. Zirconium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
79. Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Material listed in 40 CFR Part 116 (Designation of Hazardous Substances) known to be present.

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V. Other Wastes:

A. Are any liquid wastes or sludge from your Business Establishment disposed of by means other than by discharge to the sanitary sewer system?

☐ yes ☐ no

If “yes”, then complete the next two sections; if “no”, then **STOP** here.

B. These wastes may best be described as:

*Approximate Gallons
or Pounds Per Day*

☐ Acids & Alkalies (Bases)..... _____

<input type="checkbox"/>	Heavy Metal Sludge.....	_____
<input type="checkbox"/>	Inks / Dyes.....	_____
<input type="checkbox"/>	Oil and Grease.....	_____
<input type="checkbox"/>	Organic Compounds.....	_____
<input type="checkbox"/>	Paints.....	_____
<input type="checkbox"/>	Pesticides.....	_____
<input type="checkbox"/>	Plating Wastes.....	_____
<input type="checkbox"/>	Pretreatment Sludge.....	_____
<input type="checkbox"/>	Solvents / Thinners.....	_____
<input type="checkbox"/>	Other Hazardous Wastes: (specify)	_____
	_____	_____
	_____	_____
	_____	_____
<input type="checkbox"/>	Other Wastes: (specify)	_____
	_____	_____
	_____	_____
	_____	_____

C. For the above checked wastes, does your Business Establishment practice:

- ☐ On-site storage?
- ☐ Off-site storage?
- ☐ On-site disposal?
- ☐ Off-site disposal?

Briefly describe the method(s) of storage or disposal checked above: _____
